

**CERTIFICATION OF WORK**  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: Alexandria Date of Visit: 5/29/19  
VA002

Contractor Personnel on Site:

1. Patrick Donovan 2. \_\_\_\_\_

**Work Performed:**

**Preventive Maintenance** - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. 8494, 8524, 8555, 8469, 8495

**Service Calls** -- Service Call Number and Description

1. CSS# \_\_\_\_\_
2. CSS# \_\_\_\_\_
3. CSS# \_\_\_\_\_

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**CERTIFICATION OF WORK**

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To be signed by the Contractor:

Print Name: Patrick Donovan Date: 5/29/19

Signed: Patrick

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Archie M. M. Date: 2019 0529

Signed: Archie

E-Mail: \_\_\_\_\_

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST  
LIGHTING, OUTSIDE / *Photo cell*

SITE AND BLDG #: Alexandria VA 202 LOCATION/RM #: Exterior WO# 8494 ASSET # 1570 MECHANIC SIGNATURE: *Bob* DATE: 5/29/19 START TIME: 1:35 FINISH TIME: 1:50

Task	Completed	Notes
1 In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to.	<input checked="" type="checkbox"/>	
2 Schedule and coordinate work with operating personnel.	<input checked="" type="checkbox"/>	
3 Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	<input checked="" type="checkbox"/>	
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**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**TIME CLOCK, LIGHTING**

**SITE AND BLDG #:** Alexandria VA 002 **MECHANIC SIGNATURE:** John **DATE:** 5/29/19  
**LOCATION/RM #:** 2 **WO#** 8494 **ASSET #** 5969 **should be asset 1569**  
**START TIME:**  **FINISH TIME:**

ITEM	DESCRIPTION	TIME		NOTES
		IN	OUT	
1	In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to.		✓	
2	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.		✓	
3	Clean timeclock using a soft lint-free cloth and spray bottle of glass cleaner. Remove any dirt or grease build up.		✓	
4	Check physical connections.		✓	
5	Verify the timeclock configuration, ensure proper operation.		✓	
6	If applicable, check battery and replace as needed.		✓	

**Note:** The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed description of the deficiency.

To be performed by: General Maintenance Worker

**Additional Notes:**

*Could not locate. Asked bldg. Mgr & AOS and neither one knew of any Time Clock.*

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**DOMESTIC HOT WATER HEATER - GAS**

SITE AND BLDG #:

Alexandria VA 22312  
Bayer Zoom WO# 8494 ASSET # 1568

MECHANIC  
SIGNATURE: DATE: 5/29/19START TIME: 9:55FINISH TIME: 10:20

ITEM	DESCRIPTION	NOTES
1	In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered to.	<input checked="" type="checkbox"/>
2	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	<input checked="" type="checkbox"/>
3	Use caution when working with natural gas fired equipment. Be aware of any smells (rotten egg) that could be a natural gas leak.	<input checked="" type="checkbox"/>
4	Do not allow any open flames around equipment.	
1	Attach drain hose. Drain several gallons from tank to remove sediment.	<input checked="" type="checkbox"/>
2	Manually check operation of safety valve. Check for corrosion around valve. Verify the safety valve inspection tag is in place. Ensure that no personnel are in area of relief piping discharge.	<input checked="" type="checkbox"/>
3	Check all connections, electric, gas and water. Tighten as necessary.	<input checked="" type="checkbox"/>
4	Check operation and setting of aqestat. Check hot water temperature with dial thermometer, and set aqestat at minimum value required for all uses.	<input checked="" type="checkbox"/>
5	Drain storage and expansion tanks, and flush to remove sediment, scale, and solid at bottom of tank.	<input checked="" type="checkbox"/>
6	Clean sight glasses on tanks.	<input checked="" type="checkbox"/>
7	Clean strainer, check condition of traps. Report and repair leaks.	<input checked="" type="checkbox"/>
8	Clean pump, controls, switches, and starters. Check operation of pump and condition of pump seal or packing, and replace as required.	<input checked="" type="checkbox"/>
9	If applicable. Remove and inspect Anode, replace if necessary	<input checked="" type="checkbox"/>
10	Clean up work area and remove trash.	<input checked="" type="checkbox"/>
Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed description of the deficiency.		
To be performed by: General Maintenance Worker		
<b>Additional Notes:</b>		